



Emergency Department Visits with a Chief Complaint of Congestive Heart Failure, All Ages

Description: Number and proportion of Emergency Department (ED) visits with chief complaints attributed to the Congestive Heart Failure (CHF) sub-syndrome¹ in the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE). Chief complaints were reported to ESSENCE from all 45 acute care hospitals in Maryland and two freestanding emergency medical facilities. The CHF sub-syndrome includes chief complaints that: contain the word “congestive” AND either of the two following words – “failure” or “heart”.

Ages: Includes all ages.

Year(s) of Data Included in Proportion:

Numerator (Number of ED Visits with a Chief Complaint of CHF in Zip Code): 07/01/2009 – 12/31/2011

Denominator (Total Number of ESSENCE ED Visits in Zip Code): 07/01/2009 – 12/31/2011

Resident Allocation: Includes all CHF sub-syndrome chief complaints occurring in patients with a Maryland zip code at the 47 Emergency Departments in Maryland.

Data Suppression: Zip codes with a population less than 5,000 are suppressed.

Limitations: ESSENCE chief complaints are recorded by an individual who speaks with the patient upon registration at the ED. It may differ from the chief complaint that appears in the provider’s medical record note. Chief complaints are not diagnoses. Chief complaints represent the way the patient expresses their medical problem when they arrive at the ED. The diagnosis that is causing the patient’s complaints may differ from the diagnosis that might be inferred from the chief complaint. CHF Diabetic patients may be missed that have chief complaints other than those listed in the sub-syndrome criteria. The procedure for recording chief complaints may vary across EDs.

Data Interpretation: Numbers and proportions are not suitable for comparing the relative health of zip codes to each other or to the county or State from the perspective of CHF. For example, a low proportion could be due to a low degree of CHF or to a high degree of CHF with a high degree of ED visits in general (which would make a low CHF proportion despite a high degree of CHF). Therefore, no valid conclusions can be made about the health of a zip code with respect to CHF from this data. However, these proportions are suitable for comparing ED Visits with a Chief Complaint of CHF to the Asthma and Diabetes metrics to determine which of these three metrics accounts for the greatest proportion of those ED visits WITHIN the zip code being reported.

Data Sources: Data is from all 45 acute care hospitals in Maryland and two freestanding emergency medical facilities.

Data Reference: ESSENCE, Office of Preparedness & Response, Maryland Department of Health and Mental Hygiene.

¹ See the Early Notification of Community-based Epidemics (ESSENCE) data dictionary for more information on syndrome and sub-syndrome query information.